



Inland Empire Health Plan



To: Hospitals
From: IEHP – Provider Relations
Date: April 18, 2018
Subject: ADDENDUM - Referrals for Medicare Primary Inpatient Admissions

This notification will serve as an addendum to the Blast Fax which was distributed by Inland Empire Health Plan (IEHP) on October 19, 2016. The purpose of this Addendum is to clarify the process for inpatient referrals and authorizations which was implemented with an effective date of October 19, 2016.

Please refer to the table below for clarification as to IEHP inpatient referral/authorization requirements.

Member Eligibility with IEHP	Referral/Authorization Requirements
• IEHP Medi-Cal	– Referral/Authorization is needed
• IEHP Medicare DualChoice	– Referral/Authorization is needed
• Medi-Medi IEHP Medi-Cal Secondary <u>Part B Coverage ONLY</u> with admission for Part A services (Place of Service 21 & 31)	– Referral/Authorization is needed

NOTE: When IEHP is the secondary payor, no authorization is required.

For those cases where the Member has Part B Medicare coverage only and a referral/authorization may not be required from IEHP, please submit claims to IEHP with medical records attached. IEHP will perform retrospective review and approve payment based on the documented medical necessity.

Hospitals must provide IEHP with timely notification of all emergency admissions. In the event no authorization is issued, hospitals should follow the retrospective claims review process.

As a reminder, all communications sent by IEHP can also be found on our Provider portal at the following address: <https://ww3.iehp.org/en/providers/correspondence/>.

If you have any questions, please do not hesitate to contact the IEHP Provider Relations Team at (909) 890-2054.